

APPLICATION FOR WELL PERMIT

Wdett 5-48

Form No. A1-3-1990

(Please Print or Type)

FOR OFFICE USE ONLY

Application Number	API Number 13 - - -	Permit Number
Signature of Approval		Date of Approval

PART I GENERAL INFORMATION

Well Type: (Check one)

☐ Oil (Complete Parts I thru IVa, VIII, IX)

☐ Gas (Complete Parts I thru IVa, VIII, IX)

☐ Enhanced Recovery (Complete Parts I thru V, VIII, IX)

☒ Saltwater Disposal (Complete Parts I thru V, VIII, IX)

☐ Non-Commercial Gas Well (Complete Parts I thru IVa, VIII, IX)

☐ Geologic/Structure Test (Complete Parts I, II, IVa, VIII, IX)

☐ Non Potable Water Supply (Complete Parts I, II, III, VI, VIII, IX)

☐ Gas Storage/Observation (Complete Parts I, II, III, VII, VIII, IX)

Application Type (Check all applicable)

<input type="checkbox"/> New Well (\$100 fee)	<input type="checkbox"/> Change of location
<input type="checkbox"/> Workover (\$100 fee if plugged)	<input type="checkbox"/> Change of operator
<input type="checkbox"/> Deepening (\$100 fee)	<input type="checkbox"/> Revoked permit (\$100 fee)
<input checked="" type="checkbox"/> Conversion	<input type="checkbox"/> Directional Hole

Former Permit Number 33652	Former Operator Name
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Name of Operator Indiana Gas Company, Inc.	Telephone Number (317) 321-0443
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Address of Operator (☐ Check if this is a new address; effective date __/__/__)
1630 North Meridian Street

City Indianapolis	State Indiana	Zip Code 46202
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Name of Drilling Contractor John Stepp	Telephone Number (317) 525-4599
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Address of Drilling Contractor
7249 E. Blue Ridge Rd., Shelbyville, IN 46176

Permit to be sent to: Name Keith Keppel, Indiana Gas Company, Inc.
Address 1630 North Meridian Street, Indianapolis, IN 46202

Applicant is (Check one)

☐ Individual ☐ Partnership

☒ Corporation ☐ Limited Partnership

NOTE: Corporations and limited partnerships must be registered with the Secretary of State

Construction:

Surface Casing _____
 Setting Depth 725 '
 Size 8 5/8 "O.D.

Hole Size _____
11 "
 Cement Top surface '
 cu./ft. 184

Intermediate Casing _____
 Setting Depth _____ '
 Size _____ "O.D.

Hole Size _____
 _____ "
 Cement Top _____ '
 cu./ft. _____

Long String _____
 Setting Depth 1102 '
 Size 5 1/2 "O.D.

Hole Size _____
7 7/8 "
 Cement Top surface '
 cu./ft. 190

Tubing _____
 Setting Depth 1090 '
 Size 2 3/8 "O.D. EUE

Packer _____
 Setting Depth 1090 '

~~Perforations~~ Open hole

From _____ 'to _____ '

From _____ 'to _____ '

From _____ 'to _____ '

Total Depth _____
1128 '

Geological:

Deepest U.S.D.W.
 Name Upper Silurian
 Depth to Top 250 '
 Thickness 100 '

Vertical distance between
 bottom of the lowest
 U.S.D.W. to top of
 injection zone
752 '

Top Confining Zone
 Name Cincinnatian
 Depth to Top 585 '
 Thickness 350 '

Primary Lithology
☒ Shale ☐ Lime

Injection Zone
 Name Black River
 Depth to Top 1099 '
 Thickness 29 '

Primary Lithology
☐ Sandstone ☒ Lime

Injection Intervals

From 1102 'to 1128 '

From _____ 'to _____ '

From _____ 'to _____ '

Indiana Gas owns the
 property this well is
 located on.

PART VI NON-POTABLE WATER SUPPLY WELL

Proposed Total Depth _____'	Name of Withdrawal Formation _____	Water Withdrawal Interval From _____' To _____'
Describe the proposed use of water and estimate the daily production withdrawal in gallons: _____ _____ _____		

PART VII GAS STORAGE/OBSERVATION WELL

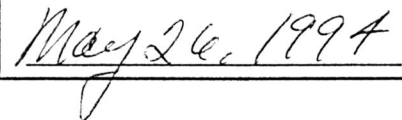

Proposed Total Depth _____'	Injection Interval From _____' To _____'	Name of Lowest Drilled Formation _____
Purpose of Observation Well _____ _____ _____		
Method of Operation (include frequency & technique used to monitor) _____ _____ _____		

PART VIII AFFIRMATION

I affirm under penalty of perjury that the information provided in this application is true to the best of my knowledge and belief.

Signature of Operator or Authorized Agent

Date



INSTRUCTIONS:

- Applications must be sent to the Department of Natural Resources, Division of Oil and Gas, Attn: Technical Section, Old Trails Building, 309 W. Washington St., Suite 601, Indianapolis, Indiana 46204.
- Please print or type when filling out this application.
- If applying for a Class II well, a laboratory analysis of the injection water must be attached to this application. The analysis must include at least: 1.) Specific Gravity 2.) pH 3.) Total Dissolved Solids(TDS)/Milligrams per Liter(MGL) 4.) Water Resistivity 5.) Water Temperature.
- If permit is to be sent by overnight mail, the applicant must include Federal Express or U.P.S. account numbers.
- If "YES" box checked under PART II Acreage Communitization block, then attach Pooling Declaration or Communitization Agreement, or specify the permit number under which the agreement was previously submitted.
- The letters U.S.D.W. when used in this application refer to an Underground Source of Drinking Water.
- If calculation was used for determining Maximum Injection Pressure(MIP), the following formula must apply:
$$\text{MIP} = \{[0.8 \text{ psi/ft} - (0.433 \text{ psi/ft} \times \text{specific gravity})] \times \text{depth}\}$$

If well testing was used to determine Maximum Injection Pressure, documentation of all testing must be submitted.
- Only those individuals whose signatures appear in PART V of the Organizational Report are authorized to sign PART VIII of this application.

SURVEYORS' INFORMATION

- To be completed by surveyor.
- Clearly indicate the section, township, and range on the survey, and spot well location.
- Use the surveyors notes to explain deviations from a standard location such as topography, irregular, correctional or fractional sections, military donation and surveys.
- To be completed by operator.
- **OIL, GAS, GEOLOGICAL OR STRUCTURE TEST, AND GAS STORAGE/OBSERVATION WELLS:**
 - Outline leased area, drilling unit allotment.
- **CLASS II AND NON COMMERCIAL GAS WELLS**
 - Outline leased area.
 - Draw 1/4 mile radius circle around the proposed well and spot all other drilling, plugged, or unplugged wells within the circle that intersect the injection zone. Enter permit number under each well within 1/4 mile radius.

[illegible]

Hand-drawn map on a grid showing four locations:

- IGC #1**
32681 ✓
St. Peter
- IGC #9**
39037 ✓
37723
- Goss #1** ✓
28099
St. Peter
- Goss #9** ✓
34213
St. Peter

Scale: 1" = 1000'

R 6 W

I hereby certify that to the best of my knowledge and belief the proposed location of the above described well, fixed as the result of an instrument survey made by me in compliance with the requirements of the law of Indiana, is truly and correctly set forth hereon.

Signature of registered Indiana land surveyor	Date signed (Month, day, year)
Address	Phone Number